

PART B—ISSUE FEE TRANSMITTAL

242-6231W
561-30.W

MAILING INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE. Blocks 2 through 6 should be completed where appropriate. All further correspondence including the Issue Fee Receipt, the Patent, advance orders and notification of maintenance fees will be mailed to addressee entered in Block 1 unless you direct otherwise, by: (a) specifying a new correspondence address in Block 3 below; or (b) providing the PTO with a separate "FEE ADDRESS" for maintenance fee notifications with the payment of Issue Fee or thereafter. See reverse for Certificate of Mailing.

1. CORRESPONDENCE ADDRESS		2. INVENTOR(S) ADDRESS CHANGE (Complete only if there is a change)	
RONALD P. KANANEN MARKS AND MURASE 2001 L STREET NW SUITE 700 WASHINGTON DC 20036		INVENTOR'S NAME Ronald P. Kananen Street Address City, State and ZIP Code CO-INVENTOR'S NAME Washington Street Address City, State and ZIP Code 02 <input type="checkbox"/> Check if additional changes are on reverse side	

SERIES CODE/SERIAL NO.	FILING DATE	TOTAL CLAIMS	EXAMINER AND GROUP ART UNIT	DATE MAILED
08/392,247	02/22/95	013	MORANO IV, S	07/17/96
First Named Applicant: ELBERTU (Name of person making deposit)				

TITLE OF INVENTION: LEVITATION SYSTEM USING PERMANENT MAGNETS FOR USE WITH TRAINS AND THE LIKE TYPE OF RIGHT-OF-WAY VEHICLES (AS AMENDED)

ATTYS DOCKET NO.	CLASS-SUBCLASS	BATCH NO.	APPLN. TYPE	SMALL ENTITY	FEE DUE	DATE DUE
3 BER-005/018	104-088-000	013	UTILITY	YES	\$625.00	10/17/96

3. Correspondence address change (Complete only if there is a change)		4. For printing on the patent front	
Ronald P. Kananen Marks & Murase L.L.P. 2001 L Street, NW Suite 700 Washington, DC 20036		page, list the names of not more than 3 registered patent attorneys or agents OR, alternatively, the name of a firm having as a member a registered attorney or agent. If no name is listed, no name will be printed. 1. Ronald P. Kananen 2. 3.	
5. ASSIGNMENT DATA TO BE PRINTED ON THE PATENT (If any)		6. The following fees should be charged to:	
(1) NAME OF ASSIGNEE (2) ADDRESS (CITY & STATE OR COUNTRY)		DEPOSIT ACCOUNT NUMBER 23-0978 (ENCLOSE PART C) <input type="checkbox"/> Issue Fee <input type="checkbox"/> Advance Order - # of Copies <input type="checkbox"/> Any Deficiencies in Enclosed Fees	
A. <input checked="" type="checkbox"/> This application is NOT assigned. <input type="checkbox"/> Assignment previously submitted to the Patent and Trademark Office. <input type="checkbox"/> Assignment is being submitted under separate cover. Assignments should be directed to Box ASSIGNMENTS.		THE COMMISSIONER OF PATENTS AND TRADEMARKS is required to apply the Issue Fee to the application identified above. (Signature) Ronald P. Kananen, RN 24,104 (Date) 9/18/96	

TRANSMIT THIS FORM WITH FEE-CERTIFICATE OF MAILING ON REVERSE